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Application Number

		Application Number	10/500,	854					
TRANSMITTAL		Filing Date	March 2	24, 200	5				
FORM		First Named Inventor	Peter W	Peter William McOwan					
		Art Unit	2624						
(to be used for all correspondence after initial filing)		Examiner Name	Park, Ed	Park, Edward					
Total Number of Pages in This Submission 22		Attorney Docket Number **03-00		005 / 0595USAP135730					
Total Namber of Edge III Thie Gashinesian									
ENCLOSURES (Check all that apply) After Allowance Communication to TC									
Fee Transmittal Form	ittal Form		Drawing(s)						
Fee Attached	Fee Attached			Ш	Appeal Communication to Board of Appeals and Interferences				
✓ Amendment/Reply	Petition			Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)					
After Final		Petition to Convert to a Provisional Application			Proprietary Information				
Affidavits/declaration(s)		Power of Attorney, Revocat Change of Correspondence			Status	Letter			
Extension of Time Request		Геrminal Disclaimer			Other below)	Enclosure(s) (please Identify :			
Express Abandonment Request	F	Request for Refund							
Information Disclosure Statement		CD, Number of CD(s)							
	Landscape Table on C	D							
Certified Copy of Priority Document(s)	ks								
Reply to Missing Parts/					onco				
Incomplete Application Reply to Missing Parts under 37 CFR 1.52 or 1.53	th Extension of Time is being filed with this Response.								
under 57 GFK 1.52 0F1.53	` 								
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT									
Firm Name Woodcock Washburn LLP									
Signature /Robert A. Madayag/									
Printed name Robert A. Madayag									
Date March 27, 2008				Reg. No. 57,355					
	CERTIFIC	CATE OF TRANSMIS	SION/MAII	LING					
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:									
Signature E-filed on 3/27/08									
Typed or printed name N/A	Date N			N/A					

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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995 no persons are required to respond to a collection of information unless it displays a valid OMB control number Complete if Known Effective on 12/08/2004 Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). 10/500,854 Application Number FEE TRANSMITTAL Filing Date March 24, 2005 For FY 2008 First Named Inventor Peter William McOwan **Examiner Name** Park, Edward Applicant claims small entity status. See 37 CFR 1.27 Art Unit 2624 TOTAL AMOUNT OF PAYMENT 3.380.00 **03-0005 / 0595USAP135730 Attorney Docket No. METHOD OF PAYMENT (check all that apply) Check Credit Card Money Order None Other (please identify): Deposit Account Deposit Account Number:_ 23-3050 ____ Deposit Account Name: Woodcock Washburn LLP For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) ✔ Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. **FEE CALCULATION** 1. BASIC FILING, SEARCH, AND EXAMINATION FEES **EXAMINATION FEES FILING FEES** SEARCH FEES **Small Entity Small Entity Small Entity Application Type** Fee (\$) Fees Paid (\$) Fee (\$) Fee (\$) <u>Fee (\$)</u> Fee (\$) Fee (\$) Utility 310 155 510 210 105 255 0.00 Design 210 105 0.00 100 130 50 65 0.00 210 Plant 105 310 155 160 80 310 0.00 Reissue 155 510 255 620 310 Provisional 210 0.00 105 0 0 0 2. EXCESS CLAIM FEES **Small Entity** Fee (\$) Fee Description Fee (\$) Each claim over 20 (including Reissues) 50 25 Each independent claim over 3 (including Reissues) 210 105 Multiple dependent claims 370 185 **Total Claims Extra Claims** Fee (\$) Fee Paid (\$) **Multiple Dependent Claims** = 1,700.00 Fee (\$) 54 34 50.00 Fee Paid (\$) HP = highest number of total claims paid for, if greater than 20. 0.00 0.00 **Extra Claims** Fee Paid (\$) Indep. Claims Fee (\$) _ - 3 or HP = ____ x 210.00 HP = highest number of independent claims paid for, if greater than 3. 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee Paid (\$) _____ (round **up** to a whole number) x N/A - 100 = _ / 50 = Ω 0.00 4. OTHER FEE(S) Fees Paid (\$) Non-English Specification, \$130 fee (no small entity discount) 0.00 Other (e.g., late filing surcharge): Petition for 3-month Extension of Time (large entity) \$1,050.00

SUBMITTED BY							
Signature	/Robert A. Madayag/	Registration No. (Attorney/Agent) 57,355	Telephone (404) 459-5649				
Name (Print/Type)	Robert A. Madayag		Date March 27, 2008				

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